

DECUMENT DOD DE MAN	
REQUEST FOR PATENT FEE REFUND	
1 Date of Request: 9-16-05	Serial/Patent # 10/533348
3 Please refund the following fee(s):	4 PAPER 5 DATE NUMBER FILED 6 AMOUNT
Filing	\$
Amendment	\$
Extension of Time	\$
Notice of Appeal/Appeal	\$
Petition	\$
Issue	\$
Cert of Correction/Terminal Dis	sc. \$
Maintenance	\$
Assignment	\$
Other	\$
	7 TOTAL AMOUNT OF REFUND \$100. 2
	8 TO BE REFUNDED BY:
10 REASON:	Treasury Check
✓ Overpayment	Credit Deposit A/C #:
Duplicate Payment	,031728
No Fee Due (Explanation):	
11 REFUND REQUESTED BY:	
TYPED/PRINTED NAME: Barbara CA	An Phe!/_ TITLE:
SIGNATURE: 46(0)	PHONE:
OFFICE: 9CT/DO/FO	Renln. Ref: 09/19/2005 BCAMPBEL 0020420300
THIS SPACE RESERVED FOR FINANCE USE O	
APPROVED:	DATE:
Instructions for committee Calif	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: